South Los Angeles Neighborhood Partnerships Los Angeles Education Partnership

Full-Service Community Schools Proposal

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South Los Angeles Neighborhood Partnerships – Los Angeles Education Partnership A. QUALITY OF THE PROJECT DESIGN

Los Angeles Education Partnership (LAEP), Los Angeles Unified School District (LAUSD) and their partners have formed the South Los Angeles Neighborhood Partnerships to improve achievement and well-being of students, parents and the community in two middle schools and three feeder elementary schools in South Los Angeles by creating and expanding full-service community schools. The *mission* of the project is to improve the academic, physical and emotional well-being of participating students so they are prepared to succeed in high school. Our *vision* is that all students are entitled to a quality education. We recognize that students face barriers and challenges to realizing their potential, and we have come together to create strategies to address those barriers and to ensure the lives of students are enriched. The partners have long served families in South L.A. Lead agency LAEP is the local leader in developing community schools, including a successful FSCS grant in the San Fernando Valley.

The two middle schools began developing community schools in 2010 (Edison) and 2011 (Bethune) with private funding that has now concluded. With limited resources, the two community schools focused on improving student achievement and building college access by integrating services at the schools and bringing in new partners. The proposed project will enable those two community schools to expand to provide new services: medical and dental care, mental health services, alignment of after-school remediation and enrichment with school curriculum, and dynamic family engagement that builds on their initial efforts. The project also will develop new community schools at three feeder elementary schools, creating a K-12 continuum of support through links to the LAEP-led community school at Fremont High School.

(i) Students, students' family members, and community to be served... no. of individuals

The target schools serve the Florence and Florence-Firestone neighborhoods of South L.A. This area is beset by poverty, crime, gangs, urban blight, few well-paying jobs, lack of health care, and struggling schools. However, the community has a long tradition of effective policy and advocacy work, and neighborhood parents want to actively participate in services that

support better futures for their children. Our project will draw on the strengths of the community to improve students' health and well-being and to support parents' role in their children's education. Our community schools will reduce barriers to learning so that students are prepared to excel in high school and pursue postsecondary education or a career.

Application Requirement (AR) 1 a. Demographics: (Data from U.S. Census Bureau, 2010 and 2012) Over the last four decades, an influx of Hispanic residents changed the racial makeup from 80% African American in 1970 to 80% Hispanic and 18% African American in 2012 in ZIP codes 90001 and 90003, where the target schools are. In this area, 35% of residents lived at or below the poverty line in 2012 vs. 21% in L.A. city; 46% of children lived below the poverty line. Median household income in 2012 was about \$32,000 vs. \$50,000 in L.A. city. In 90001 and 90003, respectively, 30% and 37% of families were headed by women vs. 24% in L.A. city. 43% of residents were foreign-born, and 78% did not speak English at home. Per 2013 data from the Calif. Dept. of Education, 52% to 74% of parents at the schools lack a high school degree.

These demographics are reflected in student populations. Compared to LAUSD overall, these schools are poorer, serve more English learners and have less diversity (see table below).

	13-14		Afr		English	Students w/
School	Enroll	NSLP*	Amer	Latino	Learner	disabilities
Bethune MS	1,358	93%	14%	86%	24%	11%
Edison MS	1,199	94%	2%	97%	23%	11%
Miramonte ES	896	89%	1%	99%	54%	12%
Parmelee ES	916	89%	3%	96%	44%	10%
75th St. ES	1,069	89%	17%	83%	45%	12%
Total/average	5,438	91%	8%	92%	36%	11%
LAUSD		75%	9%	74%	26%	n/a

^{*}National School Lunch Program, indicator of poverty

Source: California Department of Education, Dataquest, http://data1.cde.ca.gov/dataquest/

Crime and gangs impact community cohesion, perception of safety, mental health and more. In the L.A. County Dept. of Public Health's *Key Indicators of Health* (2013), only 64% of South L.A. adults believe their neighborhood is safe from crime, worse to a statistically significant degree than all other L.A. County areas (84%). Of the neighborhood factors measured by the county, (crime, safe parks, graffiti, trash, lighting, and maintenance of streets), South L.A. was worse to a statistically significant degree than the rest of L.A. communities on five of six. A lack of options in the area helps gangs recruit youth. Part of the target area is in one of the city's 12 Gang Reduction Youth Development zones, which have rates of gang-related crime at least 400% higher than other parts of the city, as well as high truancy, dropout, unemployment and poverty. In area high schools, the dropout rates ranged from 25% to 37% for the class of 2013 vs. 17% for LAUSD high schools overall. These are the challenges confronting parents and schools.

AR 1 b. Magnitude, severity: The severity of the needs is illustrated by the disproportionate incidence of poverty, low achievement, lack of medical and dental care, access to mental health care, and parent engagement.

Academic Needs: Duncombe & Yinger (in *Handbook of Research in Education Finance and Policy*, 2007) identified the risk factors for educational failure as poverty, living with a single mother, a mother with income below the poverty level and no high school degree, English Learner, and student with a disability. Given the demographics and school data above, many of the students have multiple, serious risk factors for academic failure, requiring extra assistance.

Bersin, Kirst and Liu ("Reforming California School Finance," 2008) noted that a "poverty concentration" of 50%+ eligible for the National School Lunch Program—which all five schools greatly exceed—has a negative impact on academic achievement. These poverty-concentration effects include: 1) Families' social welfare needs consume more of educators' time. 2) Families are more likely to suffer severe economic stress. 3) Peers lack vocabulary skills, so there are not good language models, particularly for English learners. 4) Peers tend to have lower aspirations. 5) Parents are often less involved in the school and tend to not hold teachers accountable.

These schools' extremely high poverty concentrations are clearly impacting achievement (see

table below). In 2013, one-quarter to half of students tested "below basic" or "far below basic" in English and math, higher than LAUSD overall. One school was in the bottom 30% of elementary schools statewide (API rank 3), with the others in the bottom 10% or 20% (API 1, 2). On the plus side, 4 schools increased their API scores from 2012 to 2013 and the fifth maintained its score.

School	Below & far	Below & far below basic Math	2012 API score	2013 API score	API rank
Bethune MS	34%	48%	685	685	1
Edison MS	28%	34%	703	716	2
LAUSD MS	21%	32%			
Miramonte ES	31%	32%	676	708	1
Parmelee ES	25%	24%	745	747	2
75th St. ES	27%	23%	760	763	3
LAUSD ES	20%	18%			

Source: California Dept. of Education, Dataquest, http://data1.cde.ca.gov/dataquest/

Attendance illustrates some of the poverty-concentration effects, such as low aspirations, social welfare needs and parent involvement. Attending school 96% of the time equals missing 7 days. Unfortunately, 26% (Miramonte) to 38% (Bethune) of students missed 7+ days per year in 2012-13 (LAUSD School Report Cards). Truancy rates (missing 3 days of school or 30 minutes of school 3 times/yr without valid excuse) ranged from 26 (Miramonte) to 76 (Bethune). Schools need to address these school-culture issues, which have serious implications for achievement.

Remediation and Enrichment: South L.A. has limited arts providers, tutoring and similar activities. Our partner Beyond the Bell coordinates after-school programs that supply homework assistance and enrichment to help level the playing field for low-income children. However, the schools and Beyond the Bell agree that the after-school program needs to be better integrated with classroom curriculum. The partners plan to thoroughly review the after-school needs and resources at each school and develop plans for enhanced remediation and enrichment.

Transitions into kindergarten, middle school and high school are critical. Because South L.A. has a dearth of good early childhood programs, children enter kindergarten unprepared and fall behind. Entering grades 7 and 9, our experience is that students are often fearful or stressed and do not know where to get help, so they act out or withdraw. Students who have social-emotional trouble fitting into schools miss instructional time and fall behind. In planning remediation and enrichment, the partners, parents and students will develop transition programs at gr. K, 7 & 9.

Medical Care: King/Drew Medical Center—the only full-service hospital in South L.A.—closed in 2007 and will reopen in 2015 as a community hospital. Data in the L.A. County Dept. of Public Health's *Key Indicators of Health* (2013) show that South L.A. lags other areas of L.A. County in access to care and health outcomes. In access, South L.A. was worse to a statistically significant degree than other areas of L.A. County combined on 10 of 11 measures. Examples:

Measure	South LA	LA County
Children ages 0-17 who have difficulty accessing medical care	17.7%	12.3%
Adults who reported difficulty accessing medical care	44.6%	31.7%
Children who did not see a doctor when needed in the last year	9.9%	6.1%
because they could not afford it		
Adults who did not see a doctor when needed in the last year	18.7%	16%
because they could not afford it		

South L.A. also is worse to a statistically significant degree than the other seven areas of L.A. County on health outcomes, such as child and adult obesity, diabetes deaths, hypertension, heart disease deaths, stroke deaths and more, according to the L.A. County Dept. of Public Health.

Implementation of the Affordable Care Act is reducing the number of uninsured South L.A. residents (8.6% of children, 38.2% of adults in 2011) and thus some cost barriers to medical care. Many low-income families are enrolled in Medi-Cal (Medicaid). But this does not increase the availability of medical care. According to the Calif. Office of Statewide Health Planning and Development, our target area is a "Primary Care Shortage Area" and "Health Professional

Shortage Area—Primary Care." This indicates a high-poverty population with high medical needs, but also a high physician-to-population ratio, plus difficulty obtaining health care in surrounding areas because of access barriers (http://gis.oshpd.ca.gov/atlas/topics/shortage).

In 2014-15, the schools will have school nurses, varying from .4 FTE at Edison and .6 FTE at 75th St. to 1 FTE at each of Bethune, Parmelee and Miramonte. The nurses' time is consumed by assisting students with disabilities, vaccination compliance, administration of medications, and emergencies. They have little or no time to provide health assessments or prevention.

Dental Care: L.A. County Dept. of Public Health's *Key Indicators of Health* (2013) found that South L.A. residents fared worse on three of four measures of dental care to a statistically significant degree vs. other areas of L.A. County: Adults who do not have dental insurance (62.9% vs. 51.8%); children (14.9% vs. 12.6%) and adults (35% vs. 30.3%) who did not obtain dental care (including check-ups) in the last year because they could not afford it.

Children who qualify for Medi-Cal (Medicaid) are covered for dental services. Also, in 2014 California began allowing adults who qualify for Medi-Cal back into its dental program (after cuts in 2008). This will improve access and affordability for low-income residents, but not the number of dentists in South L.A. Portions of our target area are designated as "Dental Health Professional Shortage Areas" according to the Calif. Office of Statewide Health Planning and Development (oshpd.ca.gov/HWDD/Shortage_Designation_Prog.html, 2012).

Mental Health: The school principals have identified mental health care as the highest need for increasing student achievement. *Mental Health Care in California* found that 68.7% of the state's adolescents who needed mental health services did not receive them in the prior year (Holt & Adams, 2013). The report's findings about demographics and mental health care signal the need in our target area: Rates of serious emotional disturbance are higher for Latino and African American children (about 8%) than for white and Asian children (about 7%). Serious emotional disturbance is more prevalent in children at or below the poverty level (10%) than children at 300%+ of the poverty level (6%). However, Latino children were much less likely (22%) to receive mental health care than white (46%) or African American (42%) children.

In L.A. County's *Key Indicators of Health* (2013) only 53.9% of South L.A. adults said they receive the social and emotional support they need, which was worse to a statistically significant degree than the rest of L.A. County (64%). The homicide rate among ages 15-34 in South L.A. is 38.8 per 100,000, which is worse to a statistically significant degree than 15.0 for the rest of the county. Witnessing violence or violence to a family member can cause posttraumatic stress or depression. And the perception of South L.A. as unsafe contributes to stress and anxiety.

The schools' mental health resources vary. In 2014-15, psychologists' time will range from .05 FTE at Parmelee, .28 FTE at Edison and .65 FTE at Miramonte, to .9 FTE psychiatric social worker plus a .38 FTE psychologist at Bethune, up to 1 FTE psychiatric social worker plus .45 FTE psychologist at 75th Street. Psychologists' and social workers' time is largely consumed with IEPs, referrals and support for traumatic events, with little counseling time.

<u>Parent Engagement</u>: LAUSD's assessment of school learning environments includes an annual parent survey. On the survey, parents agree or disagree with statements about the school climate vis a vis parents, e.g., encouragement to participate, communication with teachers. In 2012-13, Bethune, Parmelee and Miramonte were above the district averages, and 75th St. and Edison below the district averages, indicating room for improvement.

In 2012, the community was rocked by a child abuse scandal at Miramonte Elementary, resulting in a prison sentence for a longtime teacher, replacement of the school's entire teaching staff, \$30 million in settlements paid by LAUSD, and more pending civil lawsuits. With civil cases scheduled to go to trial in July 2014, there is a need to rebuild trust in the community.

LAUSD envisions Parent Centers as key to involving parents in schools. However, our partner schools have only part-time Parent Centers; there is little stability in Parent Center leadership; and training for parent leaders is inadequate. California's new Local Control Funding Formula gives additional money to schools to meet the needs of low-income students, English learners and foster youth. Also, it requires districts to develop Local Control Accountability Plans covering eight categories, one of which is parent involvement. Plans must be developed with meaningful input from parents. Our target schools need to build systems for parents to

participate. Because the target community has few quality early childhood programs (though LAEP's Early Head Start serves the neighborhood), parents of kindergarteners have not already built skills in dealing with schools and teachers. Parents need to learn how to support learning and hold educators accountable. Some of the target schools have developed promising parent-engagement practices, e.g., home and classroom visits, that our project plans scale up.

AR 1 c. Gaps addressed. The data above illustrate gaps in student achievement; medical, dental and mental health services; parent engagement; and remediation and enrichment. The project will fill gaps by increasing health available services; providing more, better parent engagement; and strengthening enrichment and remediation. <u>Disaggregated no. to be served</u>:

Unduplicated Totals	Year 1	Year 2	Year 3	Year 4	Year 5
Students	890	2,880	3,480	4,080	4,725
Family members	110	2,500	3,000	3,500	4,000
Community members*	0	0	0	0	0
Grand Total	1,000	5,380	6,480	7,580	8,725

^{*}With limited capacity, particularly in health care, the focus will be on outreach to students and families, though the project may serve some community members.

(ii) Eligible services to be provided or coordinated; meet needs; frequency provided Overview of Project Partners and Services –AR 2 List of partners

Partner	Eligible Service	Need
LAEP (lead agency)	3. Family engagement	Rebuild trust; parents to set high expectations, advocate for child, seek resources, participate in Local
		Control processes
LAUSD Beyond the	2. Remedial education	Integrate after-school with
Bell Branch	enrichment activities	curriculum; increase rigor of
		enrichment; K, 7, 9 transitions

Partner	Eligible Service	Need
UMMA Community	9. Primary health and dental	Lack of providers and difficulty
Clinic	11. Mental health services	accessing care
UCLA School of	9. Primary health and dental	Lack of providers and difficulty
Dentistry		accessing care
Weber Community Ctr	11. Mental health services	Difficulty accessing care

Additional partners that do not provide an eligible service but are key to the project are Bethune Middle, Edison Middle, Miramonte Elementary, Parmelee Ave. Elementary, and 75th Street Elementary schools; LAUSD (support and coordination); LAUSD Educational Service Center South (local district support and coordination); LAUSD Student Health and Human Services (coordination of health, dental, mental health with district services). See MOU.

AR 2 Service coordination & integration: The community schools will create systems to coordinate providers, ensure services reach the students who need them most, and connect the services with overall school reform. We will develop an infrastructure at each school, called a neighborhood partnership and led by an FSCS coordinator, to coordinate services. Neighborhood partnerships will: 1) develop a understanding of service-providers at the school, their target populations and capacity. 2) establish a system to appropriately refer students and families who need services. 3) identify needs and priorities and develop plans to address them. 4) provide forums in the school and community for feedback about significant issues. 5) build a practice of problem-solving and collective impact at the school that can be sustained over the longer term.

Each school will have a full-time FSCS coordinator, who will be responsible for developing and facilitating a neighborhood partnership, as well as ensuring the partnership accomplishes the five requirements in the prior paragraph. The coordinators will manage and link services, liaise between service providers and school staff, manage data collection, supervise outreach and coordinate with parent centers. The coordinators will become true partners with the schools.

After-school remediation and enrichment will continue to be provided by LAUSD's Beyond

the Bell. The project's after-school and remediation workgroup will work with each school to develop a plan during year 1 to be implemented in years 2–5 that will integrate the existing after-school program with classroom learning, add rigor to enrichment, ensure students receive appropriate remediation, and possibly add other partners to fill any gaps.

The project's parent-engagement coordinator will build on the schools' Parent Centers to make them more robust centers for parent leadership, parent engagement in children's learning, and participation by parents in Local Control funding and accountability processes.

The FSCS coordinators will work with school nurses on their campus to create a system for assessments and referrals to UMMA Community Clinic and any other providers. Also, the FSCS coordinators and project's health coordinator will build an infrastructure for each school to provide outreach and more prevention and nutrition information to students and parents.

Contingent on approval of plans by the state architect, UMMA will renovate bungalows on the Miramonte campus to establish space for a health, dental and mental health clinic. The new clinic in year 1 will serve Miramonte and Edison (across the street). UCLA School of Dentistry will offer monthly dental services in the clinic. Family members will obtain health care at UMMA's Fremont Wellness Center on the nearby Fremont High campus. A health workgroup will plan in year 1 to expand medical, dental and mental health services to the other three partner schools in years 2–5. The workgroup will include the health partners and LAUSD Student Health and Human Services to facilitate coordination with the district. LAUSD wants the Fremont clinic to become a hub for health services in South L.A., so our plan to create a satellite clinic and expand to more schools will create a scale-up model for other school-based clinics in the district.

In 2014-15, the schools will have fractional amounts of school psychologists, while two schools will have psychiatric social workers. At each school, a team of current and new mental health providers will identify the balance needed among individual counseling, outreach, family counseling, etc. and which of them will provide these services. The project health coordinator, with assistance from the FSCS coordinators, will ensure that mental health team meetings take place and that services are coordinated. UMMA Community Clinic will oversee the provision of

mental health services, as it does now at its school-based clinic on the Fremont High campus. Weber Community Clinic, a program of nonprofit Special Services for Groups, is the mental health provider at the Fremont clinic and will offer services at the Miramonte clinic as well.

AR 6 Description of services. AR 5 Plan, disaggregated nos., service type & frequency.

2. Remedial education, aligned with academic supports & other enrichment activities...

Beyond the Bell, 473 unduplicated students/day, is a branch of LAUSD that contracts with and oversees providers of after-school programs. Services are offered at schools from end of school day to 6 p.m., Mon.-Fri., approx. 15+ hours/week. Beyond the Bell's model is 1/3 academic assistance (e.g., homework help), 1/3 academic enrichment (art, music, etc.), and 1/3 recreation and fitness. In year 1, to better match after-school activities with classroom learning and add rigor to after-school enrichment, an after-school and intervention workgroup will form, led by the project director and including Beyond the Bell, BTB subcontractors, school curriculum experts and others as necessary. The workgroup will assess the availability of interventions and enrichment activities, identify gaps and assess what is needed to fill them. Each school will develop a plan matched to its needs and Single Plan for Student Achievement that it can implement with BTB and, if needed, more enrichment or remediation providers in years 2-5. Each school's plan will include developing curricular connections between after-school and classroom learning so that major concepts from the Common Core can be reinforced. The aim is for the school to view the after-school program as part of the overall standards-based curriculum. Though the number of children/day in after-school will likely remain steady during the grant (based on district funding), the quality and quantity of remediation and enrichment will rise.

Beyond the Bell once again has funding to conduct quality <u>summer programs</u>, after cuts during the Great Recession. The project will develop systems to identify children most in need of summer intervention and enrichment and encourage them to participate. In year 1, the workgroup will develop <u>transition programs</u> to integrate into Beyond the Bell's summer programs, for kindergarten, middle and high school that address social-emotional adjustment and academics. Transition planning into high school will be aided by the LAEP-led community school at

Fremont High, which many of the middle-school graduates will attend.

3. Family engagement, including parental involvement, leadership, literacy, education *Los Angeles Education Partnership*, 110 unduplicated family members year 1, rising to 4,000 unduplicated/year in year 5, will oversee the parent-engagement coordinator and FSCS coordinators who are responsible for working with schools to enhance family engagement. The parent-engagement coordinator and FSCS coordinators will provide parent leadership training primarily in years 1-2 for the Parent Center leaders and potential parent leaders. The goal is to build their capacity to lead a new Parent Council, develop outreach strategies and plan activities.

At least monthly, each school will offer a parent education class, taught by the FSCS coordinator, parent coordinator or external expert. LAEP's model for parent education has three components that build on each other: 1) focus on the home (attendance, homework); 2) build parent and school relations; 3) involve parents in changing their community.

By the end of year 1, there will be at least a basic <u>Parent Council</u> at each school, which will become fully functioning by the end of year 2. The Parent Councils will follow successful models developed by LAEP's community schools at San Fernando Middle and Torres High. Parent councils will meet <u>monthly</u> to identify and address issues, e.g., boosting attendance, understanding Common Core, social service needs of families, traffic and safety around schools.

Each school will work with the FSCS coordinator, parent-engagement coordinator and Parent Center to create family-engagement activities, e.g.: 1) Protocols for monthly parent observations in classrooms by year 2, following the model created by Edison. 2) Developmentally appropriate annual student-led conferencing by year 3 to enable students to take the lead in discussing their school work with parents. 3) Model for ongoing home visits by the end of year 2, initially targeting children at-risk of falling behind, but growing to encompass supportive topics. With the Title I coordinator and student support staff, schools can choose who will perform the visits, e.g., Bethune organizes and trains parents, while Edison uses the dean and counselor.

9. Primary health and dental care. <u>UMMA Community Clinic</u> (2 schools in year 1; 5 schools in years 2-5) 427 child visits and 40 adult visits in year 1, rising to 1,120 child and 882

adult visits in year 5. UMMA (University Muslim Medical Association) Community Clinic is a federally qualified health center that has been providing high-quality healthcare services to all residents of South L.A. since 1996. In 2013, UMMA opened the Fremont Wellness Center, a school-based clinic on the campus of Fremont High, in the target area; the clinic is an important component of Fremont's community school, which is led by LAEP.

Miramonte has bungalows available on campus to create medical, dental and mental health clinics and a classroom for health education. Contingent on approval of plans by the state architect, UMMA will renovate these spaces to open the clinic in January 2015. The new clinic will serve Miramonte plus Edison (across the street). In year 1, the clinic will be open 8:30 a.m.–5 p.m. Wednesday and Friday, or 17 hours per week. The Miramonte clinic will conduct 80 health assessments (physical health, dental, vision, mental) of students per month, plus referrals as needed. The clinic also will provide vaccinations and other primary health services to students. Parents and community members will go to the Fremont clinic for services, which is open 20+ hours/week. If the state architect does not initially approve plans for the Miramonte clinic, UMMA will modify and resubmit. In the interim, UMMA will provide outreach and possibly assessments and vaccinations on-site, with links to its Fremont clinic for other services.

During year 1, the project will form a <u>health workgroup</u> to plan for extending medical, dental and mental health services to the other three schools in year 2. The workgroup will include UMMA, UCLA School of Dentistry, school nurses, mental health providers, FSCS coordinators, health coordinator and LAUSD Student Health and Human Services. The workgroup will assess the feasibility of establishing clinics on the campuses vs. creating direct links to the Miramonte and Fremont clinics, and will ascertain which health services could be provided on the campuses.

In conjunction with UMMA and school nurses, the FSCS coordinators and health coordinator will build an infrastructure at each school to deliver more <u>health education</u> to students and families. They will draw on expertise of school nurses, health partners and others. Each school's neighborhood partnership and Parent Council will assist in identifying the most relevant topics.

UCLA School of Dentistry, (2 schools and 400 children in year 1, yrs 2-5 capacity may rise)

will provide preventive dental services to students at Miramonte and Edison in the Miramonte clinic <u>one-half day per month for four hours 2 to 6 p.m.</u> In year 1, 400 students will receive topical fluorides and screening, 200 of them will receive sealants, and 80 of them will have teeth cleaned. 3-4 dental students will provide services during each dental clinic, supervised by a dentist. UCLA School of Dentistry will participate in the health workgroup's year 1 planning to expand its services or attract other dental providers to increase the children served to <u>800 in yr 5</u>.

11. Mental health services. Weber Community Center, (2 schools in year 1; 5 schools in years 2-5) 20 children + 20 family members in year 1, rising 20 per year to 100 children + 100 family members in year 5, is the LAUSD-approved mental health provider at UMMA's Fremont clinic. Weber provides comprehensive outpatient mental health and substance abuse services to youth ages 0-21 and family members. Services in English and Spanish. With LAUSD, UMMA will oversee the provision of mental health services and will provide services itself or contract with more providers, if necessary, to ensure adequate resources for the school communities.

AR 6 Integration with instructional program: The academic achievement of all students is the shared goal of all the partners. The project director will collaborate with LAEP's senior director of Transform Schools and each school principal to ensure close coordination with the schools' Single Plan for Student Achievement. LAEP, which provides academic coaching and professional development at the two middle schools, will promote integration of academics and community schools through supervision by LAEP's senior director of Transform Schools, plus monthly meetings of coaches and FSCS coordinators with the senior director. LAUSD's Educational Service Center South (partner) will help coordinate district resources with project resources to ensure integration with education reform. As described, the after-school and intervention workgroup will better integrate the after-school program with core instruction.

AR 5 Results-focused; aligned goals & services. AR 6 identify intended outcomes: As described, the South L.A. project partners have based this design on the needs of the community, targeting the most critical issues for students and families. We have agreed upon the goals of our project and have developed indicators we will track to measure the success of the project (**see E.**

Project Evaluation). This is a results-focused partnership with well-aligned goals and services:

Goal	Service	Activities	Outcomes
Students are proficient	2. remediation	• strengthen after-school &	enhanced after-school
in core academic	& enrichment	integrate w/ curriculum	• more remediation &
subjects		• plan & implement	enrichment
		transitions	• transition programs
Students are healthy	9. health &	• establish Miramonte	• increase access to all
physically, socially	dental	clinic (medical, dental,	health services
and emotionally	11. mental	mental health)	better coordination of
	health	• plan & implement	health services
		services for all 5 schools	• more health educ.
Schools engage	3. family	• parent leader training	more parent resources
parents to increase	engagement	enhance Parent Centers	more parent
student achievement		• establish parent councils	participation

AR 5: Total to be served, disaggregated: Please see table on P. 8.

(iii) Potential ... for incorporating project purposes, activities... into ongoing work

LAEP has been an active collaborative partner with schools in academic achievement, community involvement in schools and parent engagement—the project purposes—for all of its 30-year history, and intends to incorporate the successful strategies and lessons learned from this project into its ongoing community-school programs. LAEP launched its first community school in 2008, and plans to continue developing new community schools and supporting existing community schools after the completion of this grant. The data gathered through the evaluation of this project will provide valuable information for LAEP's other community schools.

At the schools, the neighborhood partnerships will develop systems for identifying and solving problems and creating collective impact that can be sustained, with or without a full-time FSCS coordinator. Examples are the Parent Council, systems for referring students for health

care, process for continuing to align after-school programs with standards-based curriculum, etc. All the schools are contributing funding to this project. With increased funding via the Local Control Funding Formula and more school-level ability to establish priorities for use of funds, the schools may be able to allocate resources to extending other project activities. Collaborative planning and delivery of health care will be ongoing, as will after- school programs.

(iv) Integrate with or build on similar or related efforts using existing funding streams...

Our project is well-aligned with the goals and strategies that LAUSD is undertaking as one of eight California school districts granted the CORE (California Office of Reform Education) waiver from No Child Left Behind by the U.S. Department of Education. For example, the CORE-waiver districts will be implementing the holistic School Quality Improvement System that evaluates schools based on academic (60%), social-emotional (20%), and school culture and climate (20%) measures. Thus, no school can be considered successful without addressing social-emotional needs and culture and climate. Our project will enable target schools to strengthen these often-neglected areas while also supporting academic success through improved remediation, enrichment, parent engagement and health. Also, our project includes two "focus" schools (Bethune and Miramonte, for low-achieving subgroup) identified by the CORE waiver as needing extra assistance. Thus, the project will support schools that LAUSD is emphasizing. Bethune and Miramonte are receiving more funding for after-school intervention, which will be integrated into the plan developed during year 1 for remediation and enrichment.

Also, California is implementing the new Local Control Funding Formula that directs more funding to schools with high percentages of low-income, English learners and foster students, as the target schools do. Thus, the project is targeting schools that the state is particularly interested in improving. Also, LCFF gives districts and schools flexibility to allocate funding to local needs. Our target schools are directing \$10,000 each to this project.

The state is implementing Local Control Accountability Plans (district- and school-level monitoring of outcomes). Our project is well-aligned to support nearly all of the eight LCAP focus areas: student achievement, student engagement, Common Core, parental involvement,

school climate, basic services (facilities, materials), course access, and other student outcomes.

In alignment with the goals of Title I and Title III, each school's FSCS coordinator, Title I coordinator and neighborhood partnership will work closely together to identify low-income and English learner students for intervention and support and to coordinate services.

The project will leverage district, state and private funds that Beyond the Bell receives for after-school and summer programs. Also, the project will leverage the funding that UMMA and Weber (Special Services for Groups) receive to offer health and mental health services, including federal, state, county, Medi-Cal (Medicaid) reimbursements and private donations.

B. ADEQUACY OF RESOURCES

(i) Facilities, equipment, supplies, other resources provided by applicant and partners

The schools have agreed to provide space for the FSCS coordinators. Beyond the Bell's after-school programs already have space on the campuses, and BTB will supply the staff to conduct the after-school programs. Each school has a Parent Center on campus that will be the hub for family engagement. LAEP has offices in downtown L.A., about 7 miles from the area, where the project director, parent-engagement coordinator and project assistant will have office space, though they will spend most of their time at the schools.

Miramonte has bungalows available for renovation into medical, dental and mental health clinics, pending approval by the state architect. UMMA has applied for renovation funding. UMMA will provide the medical supplies and personnel (except health coordinator) needed to conduct activities from its funding sources, e.g., government and foundation grants and contracts, Medi-Cal reimbursements and individual donors. UMMA operates the Fremont Wellness Center clinic on the Fremont High campus, .5 to 1.7 miles from the target schools, where parents and others will access care. The 2,800-square-foot clinic provides primary and preventive health care, plus mental health services, to all community members and students of schools in the Fremont Zone of Choice, which includes the five target schools. The health coordinator, to be paid by the grant, will be hired and supervised by UMMA and will have office space at UMMA facilities. Weber will provide mental health services at the Miramonte and

Fremont clinics. Weber is a program of Special Services for Groups, a financially stable nonprofit with diversified funders that has been serving L.A. since 1952. UCLA School of Dentistry will provide dental students, a supervising dentist and dental equipment to the project, and the project will fund dental supplies. Included in the budget are funds for creating and maintaining a database to track the services and unduplicated participants. The budget includes a planning consultant to work with the FSCS coordinators and schools to develop neighborhood partnerships, annual workplans and other crucial planning tasks.

(ii) Relevance & commitment of each partner to implementation & success of project

AR 3: MOU: The relevance of the partners is explained in the service description above. The commitment of the partners is demonstrated by the attached MOU, which confirms their intent to participate in collaborative meetings and evaluation, contribute cash or in-kind services, as well as commitment to the mission, goals, scope and target population. The MOU names a responsible person at each partner organization to coordinate the organization's efforts and to take responsibility for compliance with federal and local regulations.

(iii) Costs are reasonable in relation to the number of persons to be served

The number of unduplicated individuals to receive eligible services is 1,000 in year 1, for a cost per person of \$500. As health services, family engagement and outreach expand, and infrastructure and systems are established, the number served per year will grow. In year 2, the cost per person drops to \$93, to \$77 in year 3, \$66 in year 4 and \$57 in year 5. Over five years, the average cost per person is \$86. FSCS funds will be used to coordinate services at five schools that collectively enrolled 5,400 students in 2013-14. The number of students, families and partners make this a very ambitious project. The project is able to set ambitious goals for numbers of people receiving the eligible services because the partners are contributing considerable match and are leveraging federal, state, local and private funding. We believe our budget outlines reasonable expenses to implement a coordinated project of this size and scope.

C. QUALITY OF THE MANAGEMENT PLAN

(i) Comprehensive plan, coordination, management & oversight...roles of principal, etc.

From LAEP's FSCS grant in the San Fernando Valley, we learned that representatives of the schools and partners did not have enough time to meet in both an overall project collaborative and a school-level collaborative. Also, each school has unique needs that should be addressed by a group focused on the school. So, LAEP and the partners redesigned the management structure for this project to provide management and oversight while each school has its own collaborative—a neighborhood partnership—that involves all relevant groups to coordinate school resources, identify and fill service gaps, and meet the unique needs of the school community.

The **project team**, responsible for vision, planning, evaluation oversight, and day-to-day operations, includes the project director, LAEP Transform Schools senior director and representatives from UMMA (health) and Beyond the Bell (after school). For implementation planning and oversight, the project team will meet monthly to review progress and address challenges. Monthly, the project director will meet with each school's team of FSCS coordinator, principal and any LAEP academic coaches. Every two weeks, the project director will meet oneon-one with each coordinator (FSCS, health, parent engagement). The project dir. will contact each key partner at least quarterly. In our experience, these focused meetings and contacts are more effective and better attended than large gatherings. In evaluation, the project team is responsible for working with the evaluator to create a comprehensive evaluation plan and then using data for ongoing assessment of student, school and parent needs, plus the progress toward the goals and objectives. The team will review data as it becomes available in monthly meetings, joined quarterly by the evaluator, and make data-driven adjustments as needed. 2x/yr, project dir. will convene a whole-project meeting for all project staff & partners to review data with the evaluator and conduct qualitative and quantitative reflection on the project. For coordinators, Transform Schools holds a monthly meeting that will include FSCS & parent-engagement coords. with academic coaches. Also, LAEP will bring the project's FSCS coordinators together with coordinators from other campuses to share knowledge and discuss common problems.

The <u>project workgroups</u> will undertake the healthcare and after-school planning plus subsequent oversight to ensure quality implementation of these plans. The health workgroup will

include UMMA, UCLA School of Dentistry, mental health providers, LAUSD Student Health and Human Services, project director and health coordinator. The workgroup will add others as needed, e.g., nurses, psychologists, social workers or administrators for effective coordination. The workgroup will meet monthly in years 1 and 2 to plan and implement expansion of services from two to five schools. In year 3 after services roll out, the workgroup may opt to reduce frequency. The after-school and intervention workgroup will include Beyond the Bell, its subcontractors, project director, LAEP or school staff who are well-versed in curriculum, plus others as needed. The workgroup will meet monthly in years 1 and 2 and less often in years 3-5.

The FSCS coordinators will facilitate <u>neighborhood partnerships</u> at their schools to identify unique needs and priorities, coordinate resources and advise on implementation. The group will include the FSCS coordinator, principal, administrators and teachers, parent leaders, service providers, parents, students and community members. The partnerships will meet eight times per year. At least twice per year, the partnerships will reach out to people beyond the regular members to attend meetings. Yearly, the neighborhood partnerships will develop workplans that prioritize their focuses and activities for the year. The partnerships will create local workgroups for projects that they decide to pursue, e.g., peer mentoring, attendance and truancy. The neighborhood partnerships will ensure that services have the broadest reach, serve the intended beneficiaries, and that providers collaborate. Each neighborhood partnership will develop strategies for improving communication among school groups.

<u>Lead Agency</u>: LAEP will oversee, support and manage the work of the project. The lead agency will keep the project on task and focused on the goals. Also, the lead agency is the primary contact among the project team, workgroups, neighborhood partnerships and community. The lead agency has administrative responsibilities, e.g., information dissemination, management of funds, and facilitation of the hiring of consultants and staff. The project director will be hired by LAEP and supervised by LAEP's senior director of Transform Schools. The lead agency also manages the full-time FSCS coordinators and parent-engagement coordinator.

AR 8 Role of FSCS Coordinators: The FSCS coordinators will link the project director,

service providers and stakeholders at the school. The coordinators will convene neighborhood partnerships and ensure all groups are represented. The coordinator will work with the principal and neighborhood partnership to develop an annual workplan, based on school needs and priorities. The coordinator will be the daily facilitator of services on the campus. The coordinator will organize services in concert with the school principal, Title I coordinator, school staff, neighborhood partnership, parent-engagement coordinator, health coordinator and partners. The coordinator will identify and organize existing services on campus to increase access. This position will facilitate communication, including a monthly electronic newsletter; oversee data reporting by the providers, students and parents; and be responsible for compliance with the evaluation plan. The coordinator will be responsible for knowing the service providers, school staff, students and families and focusing them on a shared mission that all students be successful.

Principals: Each principal is a member of the neighborhood partnership and shares its vision. The principal will retain complete authority over the school and will work closely with the FSCS coordinator and neighborhood partnership to prioritize needs and plan activities that are consistent with the school plan. The principal must approve the workplan each year so that partnership activities align with the school plan. The principal will arrange for space on campus for the FSCS coordinator. The principal will help develop links between the school's academic program and after-school program, Parent Center and Parent Council and healthcare providers.

<u>Partners</u>: Each partner supports the project goal and objectives. Partners will help develop and implement the schools' workplans; collect and provide the data identified in the evaluation plan; participate in ongoing assessment; work collaboratively; and fulfill program commitments. Each partner has identified adequate resources, including non-federal match, to provide services for the full term.

<u>Parents, Students and Community Members</u> will be active on neighborhood partnerships, as Parent Center and Parent Council leaders, and in providing feedback on service quality and needs. They will help solve problems. They will be peer leaders and voices of the community. We will actively seek to engage the many parent advocacy efforts in the Fremont Zone of

Choice, such as Community Coalition (social and economic conditions) and CADRE (positive behavior support in schools), to increase the number of parents active at each school and to broaden the viewpoints on what is and is not working on the campus.

(ii) Qualifications of FSCS coordinator & key personnel incl. prior perf. of applicant

Project Director (to be hired: 80%; 75% paid by grant, 5% foundation grant) will provide management and supervision; manage and oversee the FSCS coordinators and parent-engagement coordinator; coordinate project team and workgroups; ensure compliance; ensure consistent implementation of community-school principles; identify partners and resources. Responsible for ensuring community schools integrate with schools' academic plans; maintains connections to LAEP's community school at Fremont High. Qualifications: BA or higher in child development, early childhood education, elementary or secondary teaching or similar; 5+ years experience in elementary or secondary education; supervisory and training experience preferred; bilingual English-Spanish preferred. The 80% time allocation is adequate because LAEP's Transform Schools senior director, who oversees LAEP's community-school coordinators on seven other campuses, will also provide oversight and training. Plus, LAEP will contract with a consultant to assist FSCS coordinators with strategic planning at their schools.

<u>Lua Masumi</u>, (100%; 82% grant; 18% cash match from school) has been FSCS coordinator at Edison since 2010, previously funded by a foundation grant. Examples of accomplishments: connecting students and parents to services, starting a home visit program, adding a food pantry, attracting community partners and law enforcement to deal with behavior challenges, and providing students with learning opportunities. She speaks Spanish, Persian and Mandarin Chinese and has a master's in education and BA from Portland State University.

Four FSCS coordinators (100%, 82% paid by grant; 18% cash match from schools – to be hired). Duties described in C.1. Bethune established a community school (with private funding that has concluded), and the coordinator position is vacant. Qualifications: bachelor's, preferably in related field (education, social work); 3+ years' in programs that support children's academic success through parent engagement, family support and community-school collaboration,

preferably in middle or elementary schools; excellent communication and organizational skills; strong written and interpersonal skills; preferably bilingual in English and Spanish.

Parent-engagement coordinator (100%) will build parent engagement strategies, cultivate parent leadership, strengthen relationships between parents and school staff. This position will begin halfway through year 1 so that the FSCS coordinators can begin building an infrastructure for parents to connect with. Qualifications: BA required, 3+ years working in programs that support parent engagement, family support and community-school collaboration. Previous school-based and organizing experience a plus. Bilingual English-Spanish required.

Health coordinator (100%) will be hired by UMMA and paid as a contract service. The health coordinator will help develop the health workgroup to plan and implement health services for students and families, build infrastructure to deliver more health education, help develop a system for referrals and health assessments. Qualifications: 3+ years' experience with programs that support health, family support or community-school collaboration. Previous school-based and organizing experience a plus. Bilingual English-Spanish required. BA or BS required.

<u>Project assistant</u>: (50% – to be hired) will assist with data collection and input and provide admin support. <u>Qualifications</u>: HS diploma, BA preferred; clerical and computer skills; work with schools, parents or community agencies preferred; bilingual English-Spanish preferred.

<u>Michael Butler, Public Works</u>, external evaluator. Please see section E. Project Evaluation The time of two key people **will be provided as nonfederal match** to the project:

Lara Kain (15% in-kind) joined LAEP as senior director of Transform Schools in 2013. She has integrated LAEP's rigorous instructional model and community-school model on nine high school and middle school campuses (15 schools). She supervises a staff of 20, including nine community-school coordinators. Prior to LAEP, she was at the Wisconsin Department of Public Instruction for four years, providing leadership and technical support for low-achieving schools and districts. She also worked for the University of Wisconsin–Madison and as a teacher and administrator of small public high schools. She has a bachelor's in education from the University of Wisconsin–Madison and a master's in public administration from Evergreen State College.

Ellen Pais (5% in-kind) became president & CEO of LAEP in January 2012, after 7 years as senior director of LAEP's Connecting Communities programs starting in 2005. She has 30 years' experience in community building, community relations and the law. She was the driving force behind LAEP's expansion and development of community collaboratives and community schools. She is on the steering committee of the national Coalition for Community Schools and provides technical assistance regarding community schools. Prior to LAEP, she co-founded the Community Coalition for Quality Public Schools, a school reform nonprofit. She has a J.D. from American University, Washington College of Law, and a B.A. from UC Berkeley.

AR 4 Applicant capacity & past experience: Capacity: LAEP has more than 25 years' experience building community schools in the NE San Fernando Valley and South L.A. As lead agency for community schools on nine campuses, LAEP has shown that it is adept at building large-scale collaboratives that help increase student achievement. LAEP's community-school model was featured as a case study in *The Role of Community Schools In Place-Based Initiatives* (Potapchuk, 2013). From 2008 to 2013, LAEP was lead agency for a multischool FSCS grant in the NE San Fernando Valley called Valley Neighborhood Collaborative, or VNC. Also, with private funds, LAEP launched community schools in South L.A. at Fremont High (2009), Edison (2009) and Bethune (2010); the latter two will be enhanced through the project. The schools in the FSCS-funded VNC and South L.A (Bethune and Edison middle and Fremont high schools) achieved strong gains in key outcomes, often outpacing LAUSD overall. Two examples:

	Academic Performance Index			4-year C	ohort Grac	luation
	Baseline	2013	Chg	Baseline	2013	Chg
VNC	608	681	+73	73%	83%	+10
South L.A.	574	699	+126	55%	65%	+10
LAUSD	683	749	+66	62%	68%	+6

Notes: Academic Performance Index is based on California Standards Tests and HS exit exam results. API baseline is 2007 for VNC and 2008 for South L.A. Graduation baseline is

2009-10, when California changed its calculation method. LAUSD API includes elementary schools, whose API scores typically are higher vs. secondary schools.

Experience with Target Schools: At Bethune and Edison, LAEP provided instructional literacy and English language arts coaching 2000-08. Over that time, students' ELA mean scaled scores on the California Standards Test outpaced those for LAUSD middle schools. From 2003 to 2013, LAEP led School Readiness collaboratives in South L.A. elementary schools, including Miramonte and Parmelee. In 2009, LAEP was awarded an Early Head Start grant for South L.A. In 2007, LAEP began talking to nonprofits, schools and parents about building a community-school network from birth to college to complement academic reforms. In 2008, LAEP, LAUSD and the local district developed a plan to transform academics and noncognitive supports in the Fremont schools. With private funding, LAEP launched community schools at Fremont High and Edison (2009) and Bethune (2010), while also providing teacher training and instructional models. Private funding for the coordinators at the middle schools now has ceased.

Experience with Partners: LAEP has collaborated with Beyond the Bell since 2009, UMMA 2010, Weber 2010, and UCLA School of Dentistry 20+ years. LAEP, LAUSD and the local district have partnered for 30 years.

Response to Challenges: The child abuse scandal at Miramonte in 2012 challenged parents' trust in the school system. Because of LAEP's history of providing early childhood services, parent workshops and parent support groups at the school, it was trusted to hold parent meetings that enabled parents to express their frustrations and concerns. LAEP was able to continue engaging parents in the school to help them begin to rebuild their trust.

<u>Lessons Learned</u>: Over years of collaborative-building, LAEP has learned to listen well, be very transparent and make follow-through a priority. Another lesson is that extra time is needed to build data collection systems from diverse organizations.

<u>Infrastructure</u>: The project team will provide oversight, and neighborhood partnerships will operate at each school, where providers, parents, educators and students have a voice. The infrastructure includes support from staff in LAEP's Transform Schools area, plus LAEP's

administrative, management and fundraising staff. Also, the South L.A. community schools will participate in the network of community schools and training provided by LAEP. New FSCS coordinators will shadow LAEP's experienced community-school coordinators (avg. tenure 4 years); meet monthly in year 1 with the strategic planning consultant to learn how to build a workplan; and learn meeting facilitation and outreach techniques in LAEP's Transform Schools monthly meetings. LAEP offers the training and support for FSCS coordinators to be successful.

a. <u>Building relationships & community support</u>. The project design builds on programs and strategies that LAEP has used and refined over 30 years, and on the successful community-school model that LAEP has implemented since 2008. Currently, LAEP is the lead partner for community schools on nine LAUSD campuses. The collaborative in LAEP's FSCS in the Valley grew from 1 to 4 schools and added partners and resources. In South L.A., the community-school coordinator at Fremont High has been very successful building relationships. E.g., the opening of the Fremont Wellness Center went so smoothly that the healthcare partners were happy to join LAEP in this FSCS proposal. Also, his work with police, health and government agencies led to Fremont being selected by L.A. County as a site for a new pilot program for foster youth.

In the 1980s in the Valley, LAEP worked with the new principal and community to transform then failing Vaughn Elementary into the preK-12 Vaughn Next Century Learning Center, LAUSD's first charter school and a national model. In 1993, LAEP convened community partners to develop the Urban Learning Centers—a community-school model focused on both "inside" and "outside" the classroom—that was replicated in four states. Students at two model ULC sites, Foshay Learning Center in South L.A. and Elizabeth Learning Center in SE L.A., continue to graduate students at much higher percentages than neighboring schools.

From 2003 to 2013, LAEP led school-readiness collaboratives in South L.A. and the San Fernando Valley, which included 20 partners and served 700 children ages 0-5 and families each year. The projects met their goals for no. of participants and outcomes for children and parents.

LAEP's Early Head Start program includes parent and health collaboratives and has built relationships with many partners, e.g., banks, WIC, California Maternal Mental Health Collab.

b. Collecting & using data. All LAEP programs have measurable goals and objectives and gather quantitative data for assessing success. LAEP receives student-level data from LAUSD, allowing longitudinal analyses of academic performance, graduation and attendance. Staff regularly review data against objectives to improve programs. E.g., analysis of data on college preparation of students in small schools that use LAEP's instructional model, plus student surveys, caused us to redesign and ramp up college-access activities. In our 2008 FSCS project, we found through data analysis that failing 9th-graders who participated in the most rigorous tutoring oversight had the greatest gains. All of the tutoring programs adopted the practice.

D. QUALITY OF PROJECT SERVICES

(i) Services reflect up-to-date knowledge from research and effective practice

A. Elements of successful community schools: The Coalition for Community Schools examined research findings from 20 community school initiatives (a number using quasi-experimental designs) that have produced notable improvements in student learning, family engagement, school effectiveness and community vitality (Blank, Melaville & Shah, 2003). The analysis identified four elements of successful community schools, all of which our project has:

- 1. Motivating vision. The project partners and community agree that the shared mission for the collaborative in South L.A. is to improve the academic, physical and emotional well-being of participating students so they are prepared to succeed in high school.
- 2. Connected learning experiences. An FSCS grant will enable the schools and Beyond the Bell to devise and implement a plan that better integrates after-school programs with classroom learning. The aim is to increase the rigor of after-school enrichment and to develop curricular connections between the after-school program and classroom learning.
- 3. Community partnerships. The project is an ambitious effort that will organize resources of LAUSD, schools and nonprofits to address barriers that undermine the education of South L.A. children. The resources and expertise of the partners will be organized into a well-coordinated effort that will create a whole that is greater than the sum of its parts.
 - 4. Strategic organization and financing, results-oriented focus, and financial support. Our

FSCS project will create the structural, financial, operational and evaluation processes that will enable the project to fulfill this element. The partners are committed to a results-oriented, aka results-focused, approach. The partners have signed an MOU demonstrating their agreement with the project goals, aligned services and financial commitments.

B. Individual services also are firmly grounded in research or effective practice:

Parent engagement: Parent engagement will be based on the U.S. Dept. of Education's new Family and Community Engagement Framework (2014), which is grounded in scientifically based research. Our project will follow the framework's dual focus on building the capacity of a) parents to interact with schools and b) school staff to welcome and encourage parents as partners. The framework articulates four Cs, which our family-engagement work will address:

Capabilities: parent leadership training, parent education classes. Connections: Parent Council, Parent Center, schools' Local Control Funding Formula and Local Control Accountability Plan.

Confidence: parent observations, student-led conferencing, home visits, identification of barriers and solutions. Cognition: parent education; educator training re parent engagement; joint development of protocols for home visits, student-led conferencing, classroom observations.

Greater interaction between parents and teachers that increases parents' involvement in children's education is associated with higher motivation, achievement and college-going (Gonzalez-DeHass, Willems, & Doan Holbein, 2005; Marchant, Paulson, & Rothlisberg, 2001; Zarrett & Eccles, 2006).

After-school programs: The after-school providers use Beyond the Bell's model. A report by Evaluation, Research, and Cyber-Technology found that the more hours a student participated in BTB's language arts and math tutoring, the higher the likelihood of increased test gains (2013). An 2009 evaluation of BTB's summer transition program by Evaluation and Training Institute found that participating students had significantly higher attendance, lower absences, and higher grades during the following fall than a matched group of nonparticipating LAUSD students. Outcomes for students with higher summer-transition attendance were statistically significant.

Health services: The link between health and academic achievement has been established.

E.g.: Klerman found that students who were absent 10+ days in a semester had trouble staying at grade level (*Pediatric Clinics of North America*, 1988). Wolfe's research revealed that students absent due to chronic illness (e.g., asthma, ear infections) had even lower achievement than students with high absentee rates for other reasons (*Medical Care*, 1985). According to the Dental Health Foundation, children miss 51+ million school hours annually because of dental-related illness (*The Statistical Facts of Dental Health*, 2000). Longitudinal research found that students who used school-based health care had significant increases in attendance, and that students who used mental health services achieved rapid increases in grade point averages over time vs. nonusers (Cusworth Walker et al., *Journal of Adolescent Health*, 2009.)

(ii) Services will lead to improvements in achievement of students

There is ample evidence that the services our project will coordinate and provide are likely to improve achievement: *Health care*: Children who miss too much school fall behind, and students lose considerable learning time due to medical, dental and emotional issues. School-based health care can increase attendance and achievement. *Parent engagement*: The Harvard Family Research Project's meta-analysis of studies of parental engagement in children's education found parent involvement is a significant factor in student achievement, larger effects for Latino and African American students, and the largest effect from parents' expectations for their children (Jeynes, 2005). *Parent advocacy*: When low-income parents advocate for their children's education, children's achievement increases in e.g., graduation rates and college enrollment (Mediratta, Shah, et al. Annenberg Institute for School Reform, 2008). *Academic enrichment*: Extended learning programs outside the school day can be effective in helping at-risk, low-income students catch up to grade level and increase their achievement (Council of Chief State School Officers, 2006; American Youth Policy Forum, 2006; Silva, 2007). *Absent, truant*: Research shows good attendance is a direct cause of good academic outcomes (Gottfried, 2010).

E. QUALITY OF THE PROJECT EVALUATION

Evaluator Qualifications: Public Works, Inc. (PW), a 501c(3) corporation, will be the independent evaluator. Since 1998, PW has evaluated a wide range of initiatives in L.A. County

Healthy Students evaluation of impact of a comprehensive approach to wellness in a K-12 feeder pattern of 14 LAUSD schools in South L.A. (2008-2013) 6-year evaluation of a federal Full-Service Community Schools initiative led by LAEP with LAUSD high and middle schools in NE San Fernando Valley. (2003-2013) 10-year evaluation of PasadenaLEARNs, an after-school program funded by county, state and federal funds at elementary and middle schools in Pasadena Unified. PW's efforts will be led by Executive Vice President Michael Butler. He is at the forefront of evaluation and research of California education accountability and school reform, as well as policy and research trends in a wide range of educational reform areas. He has an MA in political science from UCLA, and a BA in political science from Occidental College. Previously, he was a research fellow at the RAND Corporation in Santa Monica, Calif.

(i) Timely & valid information on management, implementation, or efficiency of project

PW is committed to collecting and disseminating evaluation data in a manner that will ensure continuous program improvement to the management, implementation and efficiency of the project. To accomplish this, the evaluation will employ an appropriate mix of quantitative and qualitative research methods to ascertain the "what" (how much impact can be documented) as well as the "why" and "how" (which factors or mix of conditions appear to be associated or correlated with patterns of results) of program implementation. As shown in the table on the next page, evaluation data will include students' attendance, test scores and participation in services. At school level, evaluation will include quantitative measures, plus survey data and qualitative focus groups and interviews. The evaluation will assess progress toward these measures:

Goal 1. Students are proficient in core academic subjects.

- a. 473+ unduplicated students will participate in after-school programs per year.
- b. Each year, 80% of schools will improve year-to-year on the School Quality Improvement Index, which includes academic (60%), social-emotional (20%) and school climate (20%) domains, beginning when it is fully implemented in 2015-16. (new index, no baseline)
- c. Each school will increase the percentage of students who attend 96% of the time (7 days

- absent) at least 1 percentage point per year, <u>or</u> they will achieve and maintain 75% of students who attend 96% of the time. (12-13 range: 62% to 74%)
- d. Middle schools will decrease the percentage of students who are truant by 3 percentage pts. annually, and elementary schools by 2 percentage pts. annually. (12-13 range: 26% to 76%)
- e. Students who receive the highest dosage of after-school academic intervention will attain a 5% increase in average scale score vs. those with no or minimal participation.

Goal 2. Students are healthy physically, socially and emotionally.

- a. 80 students will receive health screenings per month.
- b. 465 student and family-member visits for health services in year 1, rising to 2,000 in year 5
- c. 400 students will receive dental screenings year 1, rising to 800 in year 5.
- d. 40 students and parents will receive mental health services in year 1, rising to 200 in year 5.

Goal 3. Schools effectively engage parents to increase student achievement.

- a. 100 family members will attend school or parent activities in year 1, rising to 4,000 in year 5.
- b. 85%+ parents "feel welcome at school" by year 3 (12-13: 80–87%)
- c. 80%+ parents "school encourages me to participate in parent groups" yr 3 (12-13: 72-82%)
- d. 85%+ parents "teachers inform me about child's academic progress" yr 3 (12-13: 75-89%)

Data Type/Indicator	Level of Analysis	Collection Frequency	Goal & Obj
Quantitative counts of student & parent participation in medical, dental & mental health services	Students School	Monthly	2 a-d
Quantitative counts of attendance/participation in after-	Students	Monthly	1a & e
school programs and services Quantitative counts of family attendance at school	Parents	Monthly	3a
Quantitative scores from the Smarter Balanced Test	Students	Annual	1e
(grades 3-8) in English and Mathematics	G. 1		
Quantitative pupil attendance (school-wide attendance rate and percentage 96% or higher)	Students School	Annual	1c
Quantitative Truancy Rate	School	Annual	1d

¹ Per Education Code Section 48260, a truant is defined as "a pupil subject to compulsory full-time education or to compulsory continuation education who is absent from school without a valid excuse three full days in one school year or tardy or absent for more than a 30 minute period during the school day without a valid excuse on three occasions in one school year, or any combination thereof, shall be classified as a truant."

Data Type/Indicator	Level of Analysis	Collection Frequency	Goal & Obj
Quantitative School Quality Index (SQI) scores	School	Annual	1b
Survey – Parent (LAUSD instrument)	School	Annual	3 b-d
Survey – Students (grades 5 and 8 only)	School	Annual	qualitative
Survey – School Staff	School	Annual	qualitative
Qualitative Interviews	School	Annual	qualitative
External partners/site and project coordinators	Project	1 1111 07001	quaritativ
Project staff	3		
School principals			
School categorical and parent coordinators			
LAUSD ESC South Representative			
•			
Qualitative Focus Groups	School	Annual	qualitative
 Schools' Coordination of Services Team (psychiatric social worker, pupil services & attendance counselor, deans, etc.) 	Project		
• Teachers			
Students			
Parents			
 Schools' neighborhood partnerships 			
Senior LAEP staff			

AR 7: PW is committed to regularly sharing data on grant implementation with school and community stakeholders so that formative data drives decision-making. For example, PW will present outcome data on student and parent participation in eligible services (i.e., number served) twice annually at neighborhood partnerships or other project forums. PW will meet quarterly with the project team and twice a year at the whole-project meeting to report on trends or patterns in the data. PW will also collect and analyze annual survey data that will be widely shared with the schools, partners, parents and community. In these ways, the evaluation team will ensure that data on progress and issues are available to shape and inform decision-making, with stakeholders providing appropriate input, questions or areas for further investigation.

With the growing interest in research into multi-tiered approaches to improving school climate, addressing health and environmental barriers to learning, and school-community partnerships, we anticipate an audience for published research and presentations on evaluation results. PW will develop policy briefs summarizing grant accomplishments and challenges for

dissemination to policymakers, as well as draft longer research articles for submission to peerreviewed journals at both the practitioner (e.g., *Educational Leadership*) and research (e.g., *Educational Researcher*) levels. PW also intends to work closely with LAEP in submitting proposals to present at professional conferences (e.g., American Educational Research Assn.).

(ii) Guidance or strategies for replicating, testing project intervention in multiple settings.

The evaluation will assess the effectiveness of project interventions, document and assess the effectiveness of school partnerships in facilitating services, and provide formative evaluation that can inform replication. PW will ensure that our quasi-experimental evaluation study is presented in sufficient detail and clarity to allow for replication of our methodology for data collection and analysis. We believe that the proposed project holds great promise for replication given its focus on common barriers to learning eased by better access to programs and services in urban schools.

While the project does not allow the use of control groups, we will take advantage of other types of comparison groups that will enable us to test after-school interventions under different conditions or settings. Through focus groups and interviews, the evaluation will probe and document contextual factors that facilitate or limit progress. The evaluation will be mindful of fidelity to the program design, note adaptations, highlight conditions that necessitate alterations, and be aware of unexpected outcomes. We anticipate that other researchers will be able to build systematically on our findings and grow the research basis on the effectiveness of community schools as a lever for overall school improvement, access to services, and other outcomes.

(iii) Methods of evaluation will provide valid & reliable performance data on outcomes.

The central premise of the proposed project is the contention that services that address barriers to learning will improve student and school outcomes. In particular, this project is asserting that increasing access to preventative and primary care (medical, dental, mental health), coupled with parent engagement and strategic after-school services will improve academic achievement, school performance and school climate. The evaluation seeks to examine the extent to which this hypothesis holds true, and under what conditions the project can be most successful in achieving the project objectives. The evaluation will use varied quantitative and qualitative

methods to document the progress of the grant on key performance data, setting benchmarks for all outcomes in an effort to answer this research question at the five participating schools.

For data on <u>primary medical and dental care and access to mental health</u>, the evaluation will rely on the submission of aggregate monthly quantitative data on the number visits by students and families for primary medical, dental and mental health care from partners and from collaborating school-based health professionals or LAUSD Student Health and Human Services. To preserve confidentiality, these data will be reported as aggregate contacts or service hours by school and category of service. (AR 7) Throughout, the evaluation will comply with federal, state and other privacy laws and requirements. By collecting data monthly, the evaluation will monitor progress toward annual benchmarks of student and family participation.

In year 1, the evaluation will develop <u>survey instruments</u> to collect data from school staff and students at selected grade levels (e.g., grades 5 and 8) to provide data on perceptions, beliefs and behaviors linked to grant objectives. All instruments will be piloted before administration and translated as needed. Also, the evaluation will collect parent responses from LAUSD's annual School Experience Survey. The evaluation team will conduct qualitative <u>interviews and focus groups</u> with partners that provide eligible services at each school, as well as school staff most closely involved in referring students to services (i.e., schools' Coordination of Services Team) that will contextualize the student and parental attendance and participation data.

For <u>academic performance outcomes</u>, PW will employ a quasi-experimental design to compare students who receive the most hours (dosage) of after-school service. The chief vehicle for data collection will be a student-level <u>database</u> developed in year 1 to track student participation in after-school programs. PW will build on its experience in prior community-school and 21st Century Learning Center (after-school) evaluations to ensure that data are collected monthly and monitored vs. benchmarks. The database will distinguish between intervention in English and math and will track participation in tutoring and homework help. Plus, the database will include fields for student participation in extracurricular and enrichment activities. The evaluation team will also interview school and after-school staff and, as noted

above, will administer surveys to school staff and students to gather data on awareness, participation and perceptions of after-school services. Also, the evaluation team will conduct multiple focus groups of 14-20 students with relatively high levels of participation in after-school programs at each school (i.e., 70-100 students) to delve deeper into student perceptions of the project's impact on access to intervention, enrichment and tutoring. Twice per year, the evaluator will assemble available data, disseminate and discuss with school and project leaders.

By including LAUSD's unique student identifier in the database, PW will be able to <a href="https://link.gitudents.com/link.gitudents.com/link.gitudents.com/link.gitudents.com/link.gitudents.com/link.gitudents.com/link.gitudents.com/link.gitudents.com/link.gitudents

Schools will document <u>parent participation</u> in e.g., parent education, volunteerism, decision-making, and curricular school events and student performances. The evaluation also will collect data from LAUSD's annual <u>School Experience Survey</u>, which measures parent perceptions of school climate and self-reported involvement in parent groups and communication with teachers. The LAUSD data will be examined at the school level, since we will not be creating a separate parent survey. Also, the evaluation team will conduct multiple <u>focus groups</u> (English-Spanish) of 14-20 parents at each school (i.e., 70-100 parents) to delve deeper into parent perceptions of project impact on access to health, after-school and parent engagement services. Semiannually, PW will compile parent data to disseminate and discuss with school and project leaders.